State of South Dakota

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Candidate's or Committee's Report of Receipts and Expendi

Candidates and candidate committees: File in the office where you filed your nominating petition. 500 E Capitol Ave, Pierre, SD 57501-5070

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See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee New Democratic Network Complete Mailing Address 300 W. Dakot Ave Stock Fell SD. 57104-60
Name of Person Making Report Darrin Smith Phone 65-336-7222
If you are a candidate, what office are you seeking
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
NA
Type of Report (See pages 4 & 5 of Guideline Book) Non-federal Committee
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) Dec. 3, 200
<u> </u>
The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT
I Darrin 5mith (print name legibly), certify
that I have examined this report and to the best of my knowledge and
belief it is true, correct and complete.
Date: 1/29/03 Candidate Signature or Signature of Committee Treasurer or Chairperson Revised July 2001

Name of Candidate or C	Committee		<u> </u>
For the reporting peri	od ending		
	Schedule A - Direct C	Contributions	
This schedule is used for rep but for this report you may compolitical parties and enter these the next page. Any contribution or political party and all contribute amount, name, address and contributor has their own section space, or you may attach additional contribution of the contr	sums as unitemized contribution of more than \$100 or aggregations from PAC's must be explace of employment (if applied in for itemization. This scheduled is sheets of paper.	or less from individuals and tools on their respective lines be ate during a calendar year fro	ne same from elow and on m an individual ized) giving
Itemized Contributions	from Individuals		
Name	Residence Address	Place of Employment (Name of Employer)	
210000			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
	en en state en la gent transport de la companya de		\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Total of Itemized Con	tributions from Indiv	'lquals:	*\$

•

r the reporting period ending	irect Contributions (continued	1
itemized Contributions from 1	Political Parties:	*\$ <u> </u>
emized Contributions from Po	litical Parties	
Party Name	Address	
		\$
		\$
tal of Itemized Contribution	s from Political Parties:	* \$
PAC Name	PAC's must be itemized.) Address	 \$
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Name of Candidate or Committee		_
For the reporting period ending		
Schedule B - Fund	I-Raising Events Proceeds	
List on this schedule fund-raising events held to raderived from each event. If a contributor gives me aggregate being more than \$100 in the calendar years.	ore than \$100 or their contribution results in their ear, those contributions must be itemized on Schedule A.	
Type of Event	Net Proceeds	
maken maken gala semenyan		
	Total: \$	
Cohodula C	In Kind Contributions	
Report all non-cash contributions of goods or serv exceeds \$100, the name of the contributor, resider	vices and the estimated fair market value. If the value nce address and place of employment must be reported.	
Nature of Non-Cash Contribution	Estimated Value Name of Contribute	or
and the second s	en e	
	Total: \$	
	D - Other Income	
Use this schedule to report any refunds, interest e	earned or other income which is not a direct contribution.	
Source of Income	Amount	

Total: \$_____

		ending Schedule E - Ex			
This schedule is to provided for report candidates and co		tures relating to a cand nses. All other expens	idate's campaign	Line items have . All contribu	been tions to
Item	Amount	Contributions	Made to Can	didates and	Committees:
Advertising _					
Consulting _					
Postage _					
Printing _					
Rent _					
Salaries _					
Telephone _					
Travel _					
Utilities _					
Other Expense	8:				
Bank Fe	e #-	7 00			
	e e tra	And the second of the second o	The state of the State of the		use of a second

	or Committee				
For the reporting	period ending				
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.					
Owed To	Purpose		Amount		
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Total Obligations: \$____

Mama	of Candidate or Committee Week	Omocratic Wetwork	((NDN)	
Name of Candidate or Committee New Democratic Network (NDN) For the reporting period ending December 31, 202				
FOI	Summary Page			
This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.				
1.	Amount on hand, if any, at beginning	g of reporting period	\$ <u>223.38</u>	
2.	Receipts			
	Schedule A - Direct Contributions	\$ <u>Ø</u>		
	Schedule B - Fund-Raising Events	\$		
= ;	Schedule C - In Kind Contributions	\$		
	Schedule D - Other Income	\$ <u></u>		
	Total of all receipts	\$ <u> </u>		
3.	Total Monetary Receipts (A+B+D)		\$	
4.	Candidate's Personal Contribution t	o Own Campaign	\$	
5.	Monetary Loans to Candidate or Comm Reporting Period	ittee During	\$	
6.	Monetary Loans Repaid During Report	ing Period	\$	
7.	Expenditures - Schedule E		\$ <u>7</u>	
8.	Unpaid Obligations - Schedule F	\$		
9.	Amount on hand at the close of this This should equal lines (1+3+4+5) - (reporting period.	\$ 216.38	